

Statement of Deficiencies

8815-B,C: Governing Body

Not Met

Findings/Corrections

8815 C. 7. The governing body of the Provider failed to annually evaluate the administrator's performance. Documentation of an annual performance evaluation was not available in the director's file.

8817-G: Annual Training

Not Met

Findings/Corrections

8817 G. 2. (a.-g.) The Provider failed to document that direct care staff, [all], received training on an annual basis in:

- a) facility's policies and procedures;
- b) emergency and evacuation procedures;
- c) resident's rights;
- d) procedures and legal requirements concerning the reporting of abuse and critical incidents;
- e) resident care services (ADLs and IADLS);
- f) infection control to include blood borne pathogens;
- g) any specialized training to meet residents' needs.

8817 G. 5. An employee, [all], failed to sign a statement of understanding certifying that annual training had occurred. The training officer was in the process of compiling the trainings and obtaining signed statements.

8817-H: Evaluation

Not Met

Findings/Corrections

8817 H. The annual employee performance evaluation for [4 Of 6 staff] failed to include his/her interaction with residents, family, and other providers. The annual evaluations were in process and awaiting reviews.

8817-I: Personnel Files

Not Met

Findings/Corrections

8817 I. 1. (a.-i.) The Provider failed to maintain a personnel record for each employee identified below that included:

- f. annual performance evaluation, [4 of 6];
- h. documentation of annual training[all];

8817-J: Resident's Records

Not Met

Findings/Corrections

Incomplete Records, Resident Information - 8817 J. 2. (a.-o.)8817 J. 2. (a.-o.) One of 3 resident's record failed to include:

- d. name, address, and telephone number of a physician and dentist to be called in an emergency;)ne of 3 resident's records lacked the name of their physician to be called
- j. individual service plan, updates, and quarterly reviews; One of 3 residents records lacked documentation of quarterly reviews of their service plan.

8827-A: Assessment, Service Coordination and Monitoring

Not Met

Findings/Corrections

8827 A. 6. The service plan failed to be monitored on an ongoing basis to determine its continued appropriateness and to identify when a resident's condition or preferences changed. There failed to be a documented review of the service plan at least every quarter. One of 3 residents lacked documentation of quarterly reviews of their service plans.